

Today, Rep. Pete Stark (D-CA), Rep. Jim Leach (R-IA), and Sen. Barbara Mikulski (D-MD) introduced the “Clinical Social Work Medicare Equity Act of 2001.” This bipartisan bill would fix a technical error created by the Balanced Budget Act of 1997 (BBA’97) and help residents of skilled nursing facilities (SNFs) better access needed mental health care. It does so by allowing clinical social workers to bill Medicare directly when they provide mental health services to SNF residents.

“Clinical social workers are now the primary providers of mental health services to residents of nursing homes, particularly in rural and other medically underserved areas,” Rep. Stark said. “If Congress does not fix this oversight in the law, many clinical social workers will be forced to stop serving SNF residents. The ultimate victims are vulnerable seniors who need mental health care.”

In order to contain rising healthcare costs, Section 4432 of BBA’97 authorized a prospective payment system for Medicare SNFs that bundled together the costs of various services that typical residents require. Congress recognized that some ancillary services, including mental health services, are better provided on an individually arranged basis. Mental health providers, including clinical psychologists and psychiatrists, were therefore excluded from the SNF prospective payment system.

Unfortunately, clinical social workers were not placed on this exclusion list. This was an unintended oversight arising from a failure to recognize that all social workers are not alike. Some social workers are specifically trained to provide medical-social services, such as discharge planning from inpatient or long-term care settings. Because SNF residents often require this type of medical-social service, it makes sense to bundle it into the SNF prospective payment system.

Clinical social workers, however, are specifically trained to provide mental health services and have been Medicare-authorized mental health providers since 1987. Failing to exclude them from the SNF prospective payment system makes no sense.

Elizabeth Clark, Executive Director of the National Association of Social Workers, strongly endorsed the bill: “As the largest group of mental health providers nationwide, it is in the best interest of the nation for clinical social workers to be treated by Medicare like their peers – the psychiatrists and psychologists. The CSWMEA will provide parity of coverage under the prospective payment system for clinical social work services rendered in a skilled nursing facility.”

Rep. Stark concluded: "The mental health needs of our nation's senior citizens are significant. Some studies have found up to 88% of nursing home residents have mental health problems, ranging from major depression to Alzheimer's Disease. Clinical social workers are highly trained mental health professionals who can provide critical mental health services to SNF residents. We must act quickly and decisively to preserve their access to mental health services by fixing this serious error."